



The City of Lakewood, Washington, in partnership with Lakewood Community Foundation Fund (LCFF), is accepting nominations for the LARRY SAUNDERS SERVICE AWARD.

The LARRY SAUNDERS SERVICE AWARD honors a citizen or organization, for having achieved extraordinary distinction by their dedication and service to Lakewood Community.

The second presentation of this annual award is planned for the regular City Council meeting at Lakewood City Hall, at **7:00 PM, Tuesday, January 15, 2019.**

PLEASE LEGIBLY COMPLETE and deliver this Nomination Form, in person or by mail to the Reception Desk, First Floor, Lakewood City Hall, 6000 Main Street, SW, Lakewood, WA 98499, before the DEADLINE - **Close of Business, FRIDAY, SEP 28, 2018.**

NOMINEE

(Full name, person or organization you believe deserving of recognition)

ADDRESS

(Full mailing address of NOMINEE)

CONTACT INFO

Phone: _____ Email: _____
(Telephone & Email Address of NOMINEE)

NOMINATOR

(Full name, person or organization proposing recognition)

ADDRESS

(Full mailing address of person or organizational representative)

CONTACT INFO

Phone: _____ Email: _____
(We must be able to reach you ~ Phone & Email Address)

BRIEFLY DESCRIBE YOUR RELATIONSHIP TO THE PERSON OR ORGANIZATION YOU ARE NOMINATING FOR THE LARRY SAUNDERS SERVICE AWARD:

CONFIRMATION

_____ DATE: _____
(NOMINATOR please sign & date, confirming your Nomination)

DEADLINE FOR NOMINATION IS SEPTEMBER 28, 2018



NARRATIVE

TELL US WHY YOU BELIEVE THE SERVICE OF YOUR NOMINEE IS SPECIAL AND DESERVING OF COMMUNITY RECOGNITION:

(Please limit recommendation narrative to one page or 250 words)

TESTAMENT

You may annex or attach additional supporting information deemed essential to support or complement your NARRATIVE.

DEADLINE FOR NOMINATION IS SEPTEMBER 28, 2018



AWARD Distinguishing Certificate or Plaque, with name, origin, year; together with a check, **(which the Award Recipient may designate)** written to an established, qualifying¹ (not-for-profit) Lakewood entity-organization **(present to receive the contribution)**².

BENEFIT ORG Re "Award" above, as available, please consult with your NOMINEE to provide the name and contact information for the qualifying Lakewood Organization to be designated for the associated supporting contribution.

ORGANIZATION _____
(Name of organization you believe deserving of Award Contribution)

ADDRESS _____
(Full mailing address of person or organizational representative)

CONTACT INFO Phone: _____ Email: _____
(Telephone & Email Address of Organization)

COORDINATION Approval and Presentation of the LARRY SAUNDERS SERVICE AWARD is predicated upon reasonable expectation that parties involved will attend and participate, or be represented, at the City Council meeting as indicated (above). For purposes of agenda and preparation, related information will be confirmed during the preceding month, further assuming all parties concerned respond or provide timely notice.

ADDITIONAL INFO Please indicate or describe any other information, document, news item or photo/image you believe supports your NOMINEE or may otherwise assist in making a fair and valid determination for this Award³.

THANK YOU For taking the time and showing the interest required by all of us to help **MAKE A DIFFERENCE** for Lakewood Community.

¹ Any established 501(c)(3) organization dedicated to provision of a public service/benefit within City.
² Receiving organization shall participate by providing a representative to receive the check.
³ All supplemental materials provided will become part of the Application and may not be returned without specific request.

DEADLINE FOR NOMINATION IS SEPTEMBER 28, 2018